UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re: TOBEY MILLICENT TAYLOR	Case No. 16-27996
Debtor(s)	

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Tom Vaughn, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 08/31/2016.
- 2) The plan was confirmed on NA.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. \S 1329 on \underline{NA} .
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on \underline{NA} .
 - 5) The case was dismissed on 01/09/2017.
 - 6) Number of months from filing to last payment: 0.
 - 7) Number of months case was pending: 5.
 - 8) Total value of assets abandoned by court order: NA.
 - 9) Total value of assets exempted: NA.
 - 10) Amount of unsecured claims discharged without payment: \$0.00.
 - 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor \$530.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$530.00

Expenses of Administration:

Attorney's Fees Paid Through the Plan \$0.00
Court Costs \$0.00
Trustee Expenses & Compensation \$24.38
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION:

\$24.38

Attorney fees paid and disclosed by debtor: \$400.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ADVANCED MEDICAL IMAGING CEN	Unsecured	224.97	NA	NA	0.00	0.00
ADVOCATE MEDICAL GROUP	Unsecured	102.70	NA	NA	0.00	0.00
ADVOCATE TRINITY HOSPITAL	Unsecured	204.46	NA	NA	0.00	0.00
AESTHETICA CHICAGO ASSOC	Unsecured	25.00	NA	NA	0.00	0.00
AMERICASH LOANS LLC	Unsecured	1,099.45	NA	NA	0.00	0.00
BENEFIT PAYMENT CONTROL DEPA	Priority	3,125.00	NA	NA	0.00	0.00
BURKE COSTANZA & CARBERRY LL	Unsecured	87.25	NA	NA	0.00	0.00
CAINE & WEINER	Unsecured	185.00	NA	NA	0.00	0.00
CCI	Unsecured	1,535.02	NA	NA	0.00	0.00
CIRCUIT COURT	Priority	224.00	NA	NA	0.00	0.00
CITATIONS	Priority	234.70	NA	NA	0.00	0.00
CITY OF CHICAGO	Priority	4,991.20	NA	NA	0.00	0.00
CITY OF CHICAGO DEPT OF REVENU	Unsecured	4,160.00	4,779.00	4,779.00	0.00	0.00
COMCAST	Unsecured	774.43	NA	NA	0.00	0.00
COMPREHENSIVE SURGICAL SPECIA	Unsecured	157.80	88.21	88.21	0.00	0.00
CONSULTANTS GASTROENTEROLOG	Unsecured	60.00	NA	NA	0.00	0.00
Convergent Outsourcing	Unsecured	397.12	NA	NA	0.00	0.00
Court collection Services	Priority	155.35	NA	NA	0.00	0.00
CREDIT COLLECTION SERVICES	Unsecured	39.86	NA	NA	0.00	0.00
CREDITORS DISCOUNT & AUDIT	Unsecured	162.93	NA	NA	0.00	0.00
DEPARTMENT OF TREASURY	Priority	7,189.43	NA	NA	0.00	0.00
DIANE AND HARRISON GRIFFITH	Unsecured	7,800.00	NA	NA	0.00	0.00
DIRECTV	Unsecured	849.98	NA	NA	0.00	0.00
ELMHURST MEMORIAL HEALTHCAF	Unsecured	3,844.90	NA	NA	0.00	0.00
EMERGENCY MEDICAL SPECIALIST	Unsecured	162.93	NA	NA	0.00	0.00
ESCALLATE LLC	Unsecured	112.60	NA	NA	0.00	0.00
FRANCISCAN ALLIANCE	Unsecured	35.00	NA	NA	0.00	0.00
FRANCISCAN ALLIANCE	Unsecured	166.00	NA	NA	0.00	0.00
FRANCISCAN ALLIANCE	Unsecured	622.82	NA	NA	0.00	0.00
FRANCISCAN ALLIANCE	Unsecured	1,398.29	NA	NA	0.00	0.00
FRANCISCAN ALLIANCE	Unsecured	1,719.67	NA	NA	0.00	0.00

Scheduled Creditors:						
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Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
FRANCISCAN ST JAMES HEALTH	Unsecured	356.00	NA	NA .	0.00	0.00
GLENWOOD LYNWOOD LIBRARY	Unsecured	17.00	NA NA	NA NA	0.00	0.00
IC SYSTEMS	Unsecured	402.08	NA NA	NA NA	0.00	0.00
ILLINOIS BELL TELEPHONE CO	Unsecured	575.15	NA	NA	0.00	0.00
ILLINOIS COLLECTION SVC	Unsecured	25.00	NA	NA	0.00	0.00
IMAGING ASSOCIATES OF INDIANA	Unsecured	349.84	NA NA	NA NA	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	NA	15,280.60	15,280.60	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	NA NA	3,366.74	3,366.74	0.00	0.00
LA FITNESS	Unsecured	193.95	3,300.74 NA	3,300.74 NA	0.00	0.00
LAKE SUPERIOR COURT	Priority	119.50	NA NA	NA NA	0.00	0.00
MALCOM S GERALD & ASSOC	Unsecured	356.50	NA NA	NA NA	0.00	0.00
MIDLAND CREDIT MANAGEMENT	Unsecured	456.50	NA NA	NA NA	0.00	0.00
MIRAMED REVENUE GROUP	Unsecured	15.00	NA NA	NA NA	0.00	0.00
MUNICIPAL COLLECTIONS OF AMER	0	270.00	NA NA	NA NA	0.00	0.00
MUNICIPAL COLLECTIONS OF AMER	2	NA	270.00	270.00	0.00	0.00
NICOR GAS	Unsecured	678.11	NA	NA	0.00	0.00
NORTHWEST PREMIUM SERVICES	Unsecured	44.51	NA NA	NA NA	0.00	0.00
OAK LAWN IMAGING CONSULTANTS		92.00	NA NA	NA NA	0.00	0.00
OAK LAWN IMAGING CONSULTANT	Unsecured	10.50	NA NA	NA NA	0.00	0.00
OAKBROOK ANESTHSIOLOGIST LTD	Unsecured	38.00	NA NA	NA NA	0.00	0.00
OAKBROOK ANESTHSIOLOGIST LTD	Unsecured	555.30	NA NA	NA NA	0.00	0.00
OFFICE OF TRAFFIC COMPLIANCE A		250.00	NA NA	NA NA	0.00	0.00
OFFICE OF TRAFFIC COMPLIANCE AT	2	70.00	NA NA	NA NA	0.00	0.00
PAMELA J MCOUIRE	Priority	156.00	NA NA	NA NA	0.00	0.00
PATHOLOGY CONSULTANTS INC	Unsecured	33.56	NA NA	NA NA	0.00	0.00
PAYDAY LOAN STORE	Unsecured	1,252.89	NA NA	NA NA	0.00	0.00
Penn Credit	Unsecured	378.56	NA NA	NA NA	0.00	0.00
PLANET FITNESS	Unsecured	60.24	NA NA	NA NA	0.00	0.00
PRA RECEIVABLES MGMT	Unsecured	NA	681.76	681.76	0.00	0.00
PROST DATA INC	Unsecured	11.16	NA	NA	0.00	0.00
RAO UPPULURI MDSC	Unsecured	25.00	NA NA	NA NA	0.00	0.00
ROSELAND COMMUNITY HOSPITAL	Unsecured	402.00	NA NA	NA NA	0.00	0.00
RULA RAFATI	Unsecured	8,000.00	NA NA	NA NA	0.00	0.00
SANTANDER CONSUMER USA	Unsecured	12,500.00	NA NA	291.11	0.00	0.00
SANTANDER CONSUMER USA	Secured	9,500.00	22,291.11	22,000.00	505.62	0.00
SPECIALTY PHYSCIANS OF IL	Unsecured	90.00	22,291.11 NA	22,000.00 NA	0.00	0.00
ST IL TOLLWAY AUTHORITY	Priority	11,000.00	NA NA	NA NA	0.00	0.00
STATE OF ILLINOIS	Priority	983.60	NA NA	NA NA	0.00	0.00
STREETS & SANITATION	2	170.00	NA NA	NA NA	0.00	0.00
SUN CASH OF WI LLC	Priority Unsecured	725.00	NA NA	NA NA	0.00	0.00
	Unsecured		NA NA			
THE CHICAGO LIGHTHOUSE	Unsecured	156.00		NA 402.08	0.00	0.00
T-MOBILE/T-MOBILE USA INC	Unsecured	402.00	402.08		0.00	0.00
Trustmark Recovery Services US DEPT OF ED FEDLOAN		10.50	NA	NA	0.00	0.00
	Unsecured	15,125.00	15,362.85	15,362.85	0.00	0.00
VILLAGE OF OAKBROOK	Priority	825.00	NA	NA	0.00	0.00
WELLGROUP HEALTH PARTNERS	Unsecured	25.00	NA	NA	0.00	0.00

Claim	Principal	Interest
Allowed	<u>Paid</u>	<u>Paid</u>
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$22,000.00	\$505.62	\$0.00
\$0.00	\$0.00	\$0.00
\$22,000.00	\$505.62	\$0.00
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$15,280.60	\$0.00	\$0.00
\$15,280.60	\$0.00	\$0.00
\$25,241.75	\$0.00	\$0.00
	\$0.00 \$0.00 \$22,000.00 \$0.00 \$22,000.00 \$0.00 \$0.00 \$15,280.60 \$15,280.60	Allowed Paid \$0.00 \$0.00 \$0.00 \$0.00 \$22,000.00 \$505.62 \$0.00 \$0.00 \$22,000.00 \$505.62 \$0.00 \$0.00 \$0.00 \$0.00 \$15,280.60 \$0.00 \$15,280.60 \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$24.38 \$505.62	
TOTAL DISBURSEMENTS :		<u>\$530.00</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 02/13/2017 By:/s/ Tom Vaughn
Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.